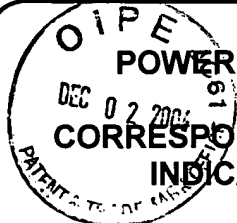


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 POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	10/749,954
	Filing Date	December 31, 2003
	First Named Inventor	JANGBARWALA et al.
	Title	Selective Fluoride and ...
	Art Unit	1724
	Examiner Name	
	Attorney Docket Number	M03A213

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
Joshua L. Cohen	34,307
David A. Hey	32,351
Philip H. Von Neida	34,942
Ira Lee Zebrak	31,147

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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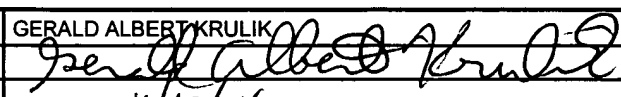
OR

<input checked="" type="checkbox"/>	Firm or Individual Name	The BOC Group, Inc.				
	Address	Legal Services-Intellectual Property				
	Address	575 Mountain Ave.				
	City	Murray Hill	State	NJ	Zip	07974
	Country	USA				
	Telephone	908-771-6469	Fax	908-771-6159		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
SIGNATURE of Applicant or Assignee of Record

Name	GERALD ALBERT KRULIK				
Signature					
Date	11/19/04	Telephone	949 498 1754		

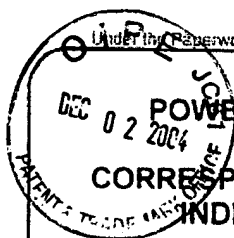
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

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OR

<input checked="" type="checkbox"/> Firm or Individual Name	The BOC Group, Inc.		
Address	Legal Services-Intellectual Property		
Address	575 Mountain Ave.		
City	Murray Hill	State	NJ
Country	USA	Zip	07974
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SIGNATURE of Applicant or Assignee of Record

Name	JUZER JANGBARWALA		
Signature	<i>Juzer Jangbarwala</i>		
Date	11/29/04	Telephone	909 525 5363

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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